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DIATEMENT A DISTRICT AND LICATION FOR Applications of Oxford Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) MUNISER FILED MUNICIPER EXTRA FEE RATE REE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS 07 CFR 1.16(d) OR INCEPENDENT CLAIMS OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR " if the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL OR CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADOI-ADDI-. TIONAL AFTER EXTRA PREVIOUSLY TIONAL AMENDMENT PAID FOR »FEEú TEE Total\_\_\_\_ 2 RNOW OR x \$1,60° OB + = 180 BRIST THESELITATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))  $\Omega$ 2 TOTAL TOTAL ADD'L FEE OR ADO'L FEE ò٤ q (Cotumn 1) (Column 2) (Coturna 3) CLAUS HIGHEST ω PRESENT REMARKING NUMBER RATE AME RATE ADOH AFTER PREVIOUSLY EXTRA TIONAL TACKIAL. THEMDMENT PAIDFOR FEE FEE. Total Or CFR 1 15(c)) STORY. 03 SESSOCIONANI (SECENTIALIS) Lieurs OH: FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR 1 16(d)) OR TOTAL ADD'L FEE OR ADO'L FEE (Column 1) (Cotumn 3) (Column 3) CLAIMS HIGHEST O REMAINING PRESENT MUMBER 2115 RATE ADD---1004 AFTER PREVIOUS: EXIRA S. DELAY. THORRAL-ALLENDMENT PAIDFOR FEE FEE ū (3) CLW 1 re(c)) 1 O(9) NOW. OS: Independent (3) CFR 1 1660 . . . . . . . . . . . . . ີ ພັ X S OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAND (2) CER'S 16(4) ОЯ

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO, Time will vary depending upon the incliniouslicase, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burder, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

IOIAL

ADO'L FEE

TOTAL

ADD1 FEE

OŔ

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.